PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  FY 2008  (Fees pursuant to the Consolidated Approximations Act. 2005 (H.R. 4818).)  Application Number 10/540,743  Filed 4/7/2006  Fine "Encapsulated Cell Therapy"  Art Unit 1633  Examiner Janet L. Epps-Ford  This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee  One month (37 CFR 1.17(a)(1))  Two months (37 CFR 1.17(a)(2))  Three months (37 CFR 1.17(a)(3))  Three months (37 CFR 1.17(a)(3))  Five months (37 CFR 1.17(a)(3))  Five months (37 CFR 1.17(a)(3))  Applicant claims small entity status. See 37 CFR 1.27.  A check in the amount of the fee is enclosed.  Payment by credit card.  The Director has already been authorized to charge fees in this application to a Deposit Account.  The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 23-0550  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2088.  I am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34.  Registration number of record of the entire interest or their representative(e) are required. Submit multiple forms If more than one signature of all the inventors or assignees of record of the entire interest or their representative(e) are required. Submit multiple forms If more than one signature is required, see below.  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(e) are required. Submit multiple forms If more than one signature is			Destat Number (Optional)		
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For "Encapsulated Cell Therapy"  Art Unit 1633			Filed 4/7/2006		
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Two months (37 CFR 1.17(a)(1)) \$12.0  Two months (37 CFR 1.17(a)(2)) \$460 \$230 \$  Three months (37 CFR 1.17(a)(3)) \$1050 \$525 \$  Four months (37 CFR 1.17(a)(4)) \$1640 \$820 \$  Five months (37 CFR 1.17(a)(6)) \$2230 \$1115 \$  Applicant claims small entity status. See 37 CFR 1.27.  A check in the amount of the fee is enclosed.  Payment by credit card.  The Director has already been authorized to charge fees in this application to a Deposit Account.  The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 23-0650  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  I am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  attorney or agent under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34.  Signature  Michele K. Yoder 412-471-8815  Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		<u>Fee</u>		- 120.00	
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attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34  Mickel X. John July 2, 2008  Signature Date  Michele K. Yoder 412-471-8815  Typed or printed name Telephone Number  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	assignee of record of the entire interest. See 37 CFR 3.71.				
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signature is required, see below.			Telephone Number		
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